

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90161 030 ****61.25

DOCUMENT # 726916

1. Entity Name

MARION-CITRUS MENTAL HEALTH CENTERS, INC.



Principal Place of Business

**5664 SW 60TH AVENUE, BLDG 1
OCALA FL 34477
US**

Mailing Address

**5664 SW 60TH AVENUE
BUILDING 1
OCALA FL 34477
US**

2. Principal Place of Business

S/A

3. Mailing Address

S/A

Suite, Apt. #, etc.

S/A

Suite, Apt. #, etc.

S/A

City & State

City & State

S/A

S/A

Zip

Country

Zip

Country

34474

S/A

34474

S/A

6. Name and Address of Current Registered Agent

**RASCO, RUSSELL
1761 SE 38 CT
OCALA FL 34471**

4. FEI Number **51-0177273**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

Rasco, Russell

Street Address (P.O. Box Number is Not Acceptable)

4575 SE 48th Place Road

City

Ocala

FL

Zip Code

34480

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WINES, LUCY ANN 6161 N. MISTY OAK TERRACE BEVERLY HILLS FL 34465	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LYTLE, RICHARD P. O. BOX 2890 OCALA FL 34478	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ASCHLIMAN, DEAN 421 N. E. 48TH AVENUE OCALA FL 34470	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S OSTERHOUDT, CLARA 4622 N. JADEMOOR DRIVE BEVERLY HILLS FL 34465	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OTT, KAREN TWO N SHADOW WOOD DRIVE INVERNESS FL 34450	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUFFORD, VINESSA 1841 S E 38TH COURT OCALA FL 34471	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Lytle, Richard PO Box 2890 Social Security Administration Ocala, FL 34478	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Aschliman, Dean 421 NE 48th Avenue Ocala, FL 34470	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Ott, Karen Two N Shadow Wood Drive Inverness, FL 34450	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Russell Rasco, Executive Director (352) 291-5455

CR2003 (10/02)

Attachments 80050171
4726916

BOARD OF DIRECTORS

D

Eamer, Ann
1841 SE 57th Avenue
Ocala, FL 34471

D

Fischer, Ted
31880 N Pinelake Village Point
Lecanto, FL 34461

D

Gannon, Joseph
7 Begonias Court
Homosassa, FL 34446

D

Gilbert, Ulysees
8440 NW 43rd Lane
Ocala, FL 34482

D

Heath, Bonnie
7200 SE 22nd Avenue
Ocala, FL 34480

D

Hopkins, Robert
6 Fox Green Court
Homosassa, FL 34446-4625

D

Kesselring, Andy
Marion County Commission
601 SE 25th Avenue
Ocala, FL 34471

D

Lynn, Robert
9116 SE 91st Circle
Ocala, FL 34481

D

Perry, Richard
One NE First Ave, Suite 303
Ocala, FL 34470

D

Poliseno, Charles
Citrus County Commission
285 S Kensington Avenue
Lecanto, FL 34461

D

Spivey, Stephen
3610 SE Fort King Street
Ocala, FL 34470

D

Wines, Lucy Ann
6161 N Misty Oak Terrace
Beverly Hills, FL 34465

D

Wood, Jessica
Post Office Box 1119
Silver Springs, FL 34489